## **RULE**

## Department of Health and Hospitals Office of the Undersecretary Bureau of Health Services Financing

## Federally Qualified Health Centers

The Department of Health and Hospitals, Office of the Undersecretary, Bureau of Health Services Financing, has adopted the following rule under the Medical Assistance Program as authorized by R.S. 46:153 et seq. and pursuant to Title XIX of the Social Security Act and as directed by the 1995-96 General Appropriation Act, which states: "The Secretary shall implement reductions in the Medicaid program as necessary to control expenditures to the level approved in this schedule. The Secretary is hereby directed to utilize various cost containment measures to accomplish these reductions, including but no limited to precertification, pre-admission screening, and utilization review, and other measures as allowed by federal law." This rule is in accordance with the Administrative Procedure Act, R.S. 49:950 et seq.

## Rule

The Department of Health and Hospitals, Office of the Undersecretary, Bureau of Health Services Financing, includes each federally qualified health center visit, i.e., encounter, as one of the 12 outpatient physician visits allowable per year for Medicaid eligibles who are 21 years of age or older.

Federally qualified health center visits for prenatal and post partern care are excluded from the maximum allowable number of physician visits per year and are reimbursed on an interim basis in accordance with the physician procedure reimbursement schedule contained in the State Plan and are cost settled.

Bobby P. Jindal Secretary

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